UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR § 1.53(b))

Attorney Docket No.	20178-5
First Inventor	Matthew Jay
Title	MEDIA DISPLAY SYSTEM FOR SKI-LIFT CHAIR
Express Mail Label No.	EL 983135127US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:
Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. ☒ *Fee Transmittal Form (e.g., PTO/SB/17)
(submit an original and a duplicate for fee processing)

2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.

3. ☒ Specification [Total Pages 9]
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference sequence listing, a table, or a computer program listing appendix or computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings *(if filed)*
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) *(35 U.S.C. 113)* [Total Sheets 6]
   ☐ Informal   ☒ Formal

5. Oath or Declaration [Total Pages 3]

   a. ☐ Newly non-executed - executed (copy)

   b. ☒ Copy from a prior application (37 C.F.R.§1.63(d))
   (for continuation/divisional with Box 18 completed)

   i. ☐ **DELETION OF INVENTOR(S)**
   Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. ☐ Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. ☐ Computer Readable Form (CRF)
   b. Specification Sequence Listing on:
      i. ☐ CD-ROM or CD-R (2 copies); or
      ii. ☐ paper
   c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 C.F.R. § 3.73(b) Statement   ☐ Power of Attorney
(when there is an assignee)

11. ☐ English Translation Document *(if applicable)*

12. ☐ Information Disclosure Statement (IDS)/PTO-1449   ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. ☐ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. ☐ Other: ------------------------------

18. If a **CONTINUING APPLICATION**, *check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:*

☒ Continuation   ☐ Divisional   ☐ Continuation-in-part (CIP)   of prior application No: 09/481,641

Prior application information: Examiner: Brian K. Green   Group / Art Unit: 3611

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ Customer Number: OR   ☒ Correspondence address below

Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP				
Address	Bank One Center/Tower				
	111 Monument Circle, Suite 3700				
City	Indianapolis	State	IN	Zip Code	46204-5137
Country	USA	Telephone	(317) 634-3456	Fax	(317) 637-7561

Name (Print/Type)	R. Randall Frisk	Registration No. (Attorney/Agent)	32,221
Signature	*R. Randall Frisk*	Date	December 31, 2003

Express Mail Label Number EL 983135127US | Date of Deposit

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Mail Stop Patent Application, P.O. Box 1450, Alexandria, VA, 22313-1450.

R. Randall Frisk
Signature of person mailing paper or fee

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U.S. PTO

FEE TRANSMITTAL
FOR FY 2004

Effective 01/01/2003. Patent fees are subject to annual revision.

Complete if Kn wn	
Application Number	N/A
Filing Date	
First Named Inventor	Matthew Jay
Group Art Unit	3611
Examiner Name	Brian K. Gre n
Attorney Docket Number	20178-5

☒ Applicant claims small entity status. See 37 CFR 1.27

Total Amount of Payment	($) 385.00

METHOD OF PAYMENT

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number	23-3030
Deposit Account Name	Woodard, Emhardt, Moriarty, McNett & Henry LLP

The Commissioner is authorized to: (*check all that apply*)

☐ Charge fee(s) indicated below   ☐ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application, excluding the payment of issue fees

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee ($)	Small Fee Code	Entity Fee ($)	Fee Description	Fee Paid
1001	770	2001	385	Utility Filing Fee	385.00
1002	340	2002	170	Design Filing Fee	
1003	530	2003	265	Plant Filing Fee	
1004	770	2004	385	Reissue Filing Fee	
1005	160	2005	80	Provisional Filing Fee	
				SUBTOTAL (1)	($) 385.00

2. EXTRA CLAIM FEES

		Extra Claims	Fee From Below	Fee Paid
Total Claims	1	-20** = 0	X 0 =	0
Independent Claims		-3** =	X =	
Multiple Dependent			=	

Large Entity		Small Entity		Fee Description
Fee Code	Fee ($)	Fee Code	Fee ($)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
		SUBTOTAL (2)	($) 0	

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee ($)	Fee Code	Fee ($)		
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for *ex parte* reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner's Action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner's Action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,330	2453	665	Petition to revive – unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other Fee (specify)

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* Reduced by Basic Filing Fee Paid	SUBTOTAL (3)	($)

SUBMITTED BY

Name (Print/Type)	R. Randall Frisk	Registration No. (Attorney/Agent)	32,221	Telephone	(317) 634-3456
Signature	R. Randall Frisk			Date	December 31, 2003

Complete (*if applicable*)

If you need any assistance in completing this form, call 1-800-PTO-9199 and select option 2.